## FEC FORM 2 STATEMENT OF CANDIDACY

				فكالب المساحدات	
1. (a) Name of Candidate (in full)	Fe				
(b) Address (number and street)	Check if address changed		2. FEC Candidate Id	entification Number	
(c) City, State, and ZIP Code West Harris	on N.X. 10607	D	3. Is This Statement	New Amended (N) OR (A)	
4. Party Affiliation Democratic	5. Office Sought	6. State & Distri	ct of Candidate	- K	
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE					
	med political committee as my Principal filed with the appropriate office listed in t		ittee for the(year of e	election(s).	
(a) Name of Committee (in full)					
Jaffe 4	NY Fru	ds of	-Mark J	effe	
	vest chester ;	Ave_	SUNE	405	
(c) City, State, and ZIP Code  Perchas	e New Non	K	10577		
DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)					
I hereby authorize the following nan- candidacy.     NOTE: This designation should be f	ned committee, which is NOT my princip		mittee, to receive and	expend funds on behalf of my	
(a) Name of Committee (in full)			·		
(b) Address (number and street)					
(c) City, State, and ZIP Code					
I certify that I have exar	nined this Statement and to the best of	my knowledge an	d belief it is true, corr	ect and complete.	
Signature of Candidate	The		Date 6	hopz	
NOTE: Submission of false, erroneous	, princomplete information may subject	the person signing	this Statement to pe	enalties of 52 U.S.C. §30109.	
	V				
9-00068		_11	L	] FEC FORM 2 (REV. 02/200	

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TYP	E OF C	OMMITTEE	
Car	/	Committee:	
(a)	X	This committee is a principal campaign committee. (Complete the candidate information below	<b>/.)</b>
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Con information below.)	mplete the candidate
	e of didate	Mark Jaffe	
	didate y Affiliati	on DEM Office Sought: House Senate President	State WX District \( \begin{align*} \text{L} & \text{L}
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Can	e of didate		
Par	ty Con	nmittee:	
(d)		(National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Poli	itical A	ction Committee (PAC):	
(e)	П	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its or	onnected organization is a:
(-,			-
		Corporation Corporation w/o Capital Stock	Labor Organization
		Membership Organization Trade Association	Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	
<b>(f)</b>		This committee supports/opposes more than one Federal candidate, and is NOT a separate committee. (i.e., nonconnected committee)	segregated fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joir	nt Fund	Iraising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for committees/organizations, at least one of which is an authorized committee of a federal candidate	
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for committees/organizations, none of which is an authorized committee of a federal candidate.	two or more political
	Com	mittees Participating in Joint Fundraiser	
	1.		
	2.	FEC ID number	
	3.	FEC ID number C	
	4.	FEC ID number	

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Write or Type Committee	Name	
6. Name of Any Connec	cted Organization, Affiliated Committee, Joint Fundraising Representative, o	or Leadership PAC Sponsor
	1	111111111
Mailing Address		
•		
		1
	CITY STATE	ZIP CODE
Relationship: Con	nected Organization Affiliated Committee Joint Fundraising Representati	ive Leadership PAC Sponso
Custodian of Records books and records.	s: Identify by name, address (phone number optional) and position of the per	rson in possession of committe
Full Name	regsurer.	
Mailing Address		
		<del></del>
Title or Position	CITY STATE	ZIP CODE
بببينيا	Telephone number	
	ne and address (phone number optional) of the treasurer of the committee; a (e.g., assistant treasurer).	and the name and address of
Full Name of Treasurer	rdan Jaffe	<del></del>
Mailing Address	9 Finding Hrill Ed	
	CITY STAYE	ZIF CODE
Title or Position	Telephone number	141-129: 1-12252

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Full Name of Designated Agent			
Mailing Address			
		<u></u>	
		لـــا	
	CITY	STATE	ZIP CODE
Title or Position	Telephone nur	mber	<u>.   -     -   </u>
safety deposit boxes	ository, etc.		
Banks or Other Dep safety deposit boxes Name of Bank, Depo Mailing Address	or maintains funds.	<del>                                     </del>	<del>                                      </del>
safety deposit boxes Name of Bank, Depo	or maintains funds.  pository, etc.  A A A A A A A A A A A A A A A A A A A		<del>                                      </del>
safety deposit boxes Name of Bank, Depo	or maintains funds.  pository, etc.  A A A A A A A A A A A A A A A A A A A	<del>                                     </del>	<del>                                      </del>
safety deposit boxes Name of Bank, Depo	or maintains funds.  pository, etc.  Para Bax 15286		<del>                                      </del>
safety deposit boxes Name of Bank, Depo	PABAXILIZER  WILLIAGIAA  CITY	<u>D</u> E	1.9,589-
safety deposit boxes Name of Bank, Depo  Mailing Address	PABAXILIZER  WILLIAGIAA  CITY	<u>D</u> E	1.9.589-
safety deposit boxes Name of Bank, Depo  Mailing Address	or maintains funds.  psitory, etc.  Para Bax 15286  WILLIAM 199 to a  city  psitory, etc.	<u>D</u> E	1.9,589-
safety deposit boxes Name of Bank, Depo  Mailing Address  Name of Bank, Depo	or maintains funds.  psitory, etc.  Para Bax 15286  WILLIAM 199 to a  city  psitory, etc.	<u>D</u> E	1.9,589-
safety deposit boxes Name of Bank, Depo  Mailing Address  Name of Bank, Depo	or maintains funds.  psitory, etc.  Para Bax 12286  Williagtory.  City  psitory, etc.	<u>D</u> E	1.9.589-

NONN - DO - NH - DON DOUDMIN FEC MAIL CENTER 2022 JUN 21 AH 11: 25 chase Newyork 10577 Westchester AVR serte 405



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EXPECTED DELIVERY DAY: 06/16/22

Federal Election Comr <b>ENVELOPE REPLACEMENT PAGE FOR</b> The FEC added this page to the end of this filing	INCOMING DOCUMENTS
Hand Delivered	Date of Receipt
Postmarked USPS First Class Mail	Date of Receipt
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked 06-14-2022
USPS Priority Mail Express	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
N	lext Business Day Delivery
Received from House Records & Registration	Date of Receipt Office
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	Date of Receipt or Postmarked
Berl	26-21-2022
PREPARER (3/2015)	DATE PREPARED